Coagulation Profile in albino rats fed on canola oil supplemented with atherogenic element: A study for 12 weeks

M FAROOQ M TAYYIB T TASNEEM A DITTA NA CHAUDHRY MA KHAN Department of Pathology, Postgraduate Medical Institute, Lahore Department of Pathology, Quaid-e-Azam Medical College, Bahawalpur Correspondence to Dr. Muhammad Farooq

Present study was designed to estimate the coagulation parameters like prothrombin time (PT), activated partial thromboplastin time (APTT) and fibrinogen level. In this study, coagulation parameters were compared in animals fed on low and high conc. of canola oil with that of canola supplemented with atherogenic element. For this purpose sixty albino rats were selected and divided into five different groups with twelve rats in each group. Group A was given synthetic diet (control) and other four groups (B, C, D and E) were given low and high conc. of canola oil and canola oil + atherogenic elements for 12 weeks duration. Blood samples were collected at 12th week duration in all the groups. PT and APTT were reduced in group containing different conc. of canola oil + atherogenic element when comparing with groups on pure canola oil. Fibrinogen level was increased in groups C and E when comparing with groups on low and high conc. of pure canola oil for prolonged use i.e. 12 weeks. The present study shows the beneficial effects of canola oil on coagulation profile. Thus canola oil may be recommended for human consumption in this country to reduce the incidence of ischemic heart disease.

Keywords: Canola oil, PT, APTT

Oils and fat belong to three types of fatty acids, monounsaturated (olive oil, rapeseed oil, canola oil), polyunsaturated (corn oil, soyabean oil) and saturated (hydrogenated oil, butter oil). Chief fatty acids of canola oil, corn oil and rapeseed oil are oleic acid, linoleic acid and erucic acid respectively. Saturated fats mainly contain palmitic acid and stearic acid. Botanical name of canola is the same as that of mustard i.e. brassica campestris. In pakistan, it is called as sweet sarson. Canola is characterized by low level of saturated fatty acids, high level of oleic acid and intermediate level of polyunsaturated fatty acids^{1,2,8}.

Canola oil, which is mostly monounsaturated fatty acid has a beneficial effect on coagulation when given with atherogenic element. Garlic and omega-3 fatty acids can decrease the platelet aggregation and increase the fibrinolytic activity. These factors are responsible to decrease thrombus formation and also to decrease the platelet aggregation.

Polyunsaturated fatty acids also increase the platelet aggregation, which through increase thrombus formation may result in stroke and myocardial infarction. These factors make the intake of monounsaturated fats (such as canola o il, monounsaturated rich sun-flower oil and olive oil) preferable to polyunsaturated fats (such as corn oil, soybean oil and margarine)⁴.

Saturated fats and cholesterol in the diet caused rise in serum cholesterol while diets low in saturated fat decreased cholesterol level in human beings, while polyunsaturated fat diet decrease plasma cholesterol level. Polyunsaturated fatty acids (PUFA) lower triglyceride (TG), very low density lipoprotein cholesterol (VLDL-c), low density lipoprotein cholesterol (LDL-c) and high density lipoprotein cholesterol (HDL – c). Canola oil contains 61% oleic acid and is second to olive oil in oleic

acid content. Oils with high oleic acid content reduce total cholesterol. It contains high levels of PUFA than palm or olive oil i.e. 21% linoleic acid and 11% linolenic acid. Canola oil is characterized by a very low level (7%) of saturated fatty acids i.e. palmitic acid, stearic acid. They have been found to increase blood cholesterol level. Major Omega-3 fatty acids are alpha-linolenic acid eicosapentanoic acid (EPA) and docosahexaenoic acid (DHA). They have been shown to lower blood cholesterol and triglyceroide levels. They also reduce the stickiness of blood cells. DHA is required for the development of the eyes and brain of infants. Alpha-linolenic acid helps to reduce the risk of ischemic heart disease and stroke.

Recent studies show that dietary alpha-linolenic acid (an O mega-3 fatty a cid found-in c anola oil) alters the fat composition of cell membranes. There is growing evidence that patients can improve lipid levels and decrease the rate of cardiovascular accidents by adding specific foods to their diets and switching from saturated and polyunsaturated to monounsaturated fats and Omega-3 fatty acids. This dietary change decreases arteriosclerotic plaque formation reduces oxidation of LDL and enhance thrombolytic activity.

Materials and Methods

Sixty albino rats of 8 weeks, weighing from 150-200gm, with equal number of males and females were selected for the study. Four different experimental diets were prepared and were given to albino rats for a total period of 12 weeks. The detail of diets is given as follows :-

- Group A was fed synthetic diet (Control diet).
- Group B was fed diet 1 (2.9% canola oil).
- Group C was fed diet 2 (2.9% canola oil supplemented with atherogenic element).
- Group D was fed diet 3 (20% canola oil).

ANNALS VOL 10 NO.3 JUL - SEP 2004 241

Group E was fed diet 4 (20% canola oil supplemented with atherogenic element).

Blood samples were taken in the morning after giving ether anesthesia to the albino rats. Samples were collected at 12th week by heart puncture with a sterile disposable syringe. 1.8 ml of blood was put in a test tube containing 0.2 ml of 3.8% sodium citrate (1:9 ratios). This plasma was

used for prothrombin time, activated partial thromboplastin time and fibrinogen level.

Results

The results of PT, APTT and fibrinogen levels in 12th week are given in table 1,2 and 3.

Table 1. PT in control and experimental groups in 12th week

PT (Sec)	A	В	С	D	E
Mean ± SD	12.1 ± 0.79	14.1 ± 0.98	14.0 ± 1.04	15.9 ± 1.31	14.7 ± 1.07
Range	11 - 13	12 - 17	12 - 16	13 - 17	13 - 16
Total Rats	12	12	12	12	12
Statistical Analysis A vs B (p<0.05) **, * (Non-significant)	A vs C (p<0.001) ***, ** (Significant)	A vs D (p<0.001) * *** (Highly Signific	**, A vs E (p<0.001) * cant)	**, B vs C (p>0.05) *, 1	D vs E (p<0.05)**

Table 2. APTT in control and experimental groups in 12th week

APTT (Sec)	Α	В	C	D	E	
Mean \pm SD	40.6 ± 2.73	40.7 ± 2.14	39.1 ± 2.85	42.8 ± 3.04	41.0 ± 2.01	
Range	35 - 43	37 - 45	34 - 43	38 - 47	38 - 43	
Total Rats	12	12	12	12	12	

Statistical Analysis

A vs B (p>0.05)*, A vs C (p>0.05)*, A vs D (p<0.05)**, A vs E (p>0.05) *, B vs C (p>0.05) *, D vs E (p>0.05)*

*** (Highly Significant) ** (Significant) * (Non-significant)

Table 3. Fibrinogen level in control and experimental groups in 12th week

Fibrinogen (mg/dl)	Α	В	С	D	E
Mean ± SD	222.1 ± 74.4	194.6 ± 38.6	239.6 ± 37.98	220.1 ± 67.08	253 ± 39.2
Range	160 - 375	145 - 245	185 - 310	200 - 400	165 - 310
Total Rate	12	12	12	12	12

Statistical Analysis

A vs E (p>0.05) *, B vs C (p<0.001) ***, A vs B (p>0.05) *, A vs C (p>0.05) *, A vs D (p<0.05) **, D vs E (p>0.05)* * (Non-significant)

** (Significant) *** (Highly Significant)

Discussion

Prothrombin Time: The mean PT of experimental groups B-D was prolonged significantly (p<0.001) as compared to control group. The mean PT of the albino rats in group C-E was raised significantly (p<0.001) at 12th week as compared to control animals. This rise in PT of the animals on canola oil diet (low and high conc) may be due to effect of omega-3 on coagulation system. Our observations are in accordance with the results of Turner (1990) who also observed similar findings in his experimental study. The mean PT of group D was found to be increased significantly (p<0.05) as compared to that of E at 12th week. It indicated that use of high conc. of canola oil for prolonged period is causing increased PT due to enhanced fibrinolytic system. The mean PT of group E was reduced significantly (p<0.05) than that of group D. This finding can be due to inhibitory effect of atherogenic element on the fibrinolytic system in prolonged use.

Activated partial Thromboplastin time: The mean APTT of groups B, C and E was comparable with that of control group at 12th week. However, mean APTT of group D was increased significantly (p<0.05) as compared to

control group. This rise in APTT may be due to high contents of canola oil for prolonged period on coagulation system. Turner (1990) while studying the effect of omega-3 on coagulation system also observed enhanced fibrinolysis in experimental animals. At 12th week, the mean APTT of group C vs B and group E vs D was found to be reduced though non-significantly. This reduction in APTT may be attributed to the inhibitory effect of atherogenic element present in diets of groups C and E on coagulation system.

Fibrinogen Level: The mean fibrinogen levels of groups C and E were also raised though non-significantly as compared to control group at 12th week. This rise in fibrinogen level is presumed to be the effect of atherogenic element present in the diets of albino rats. The mean fibrinogen levels of groups C and E were raised significantly (p<0.001) as compared to that of groups B and D respectively. Such a rise in fibrinogen level in groups C and E at 12th week may be due to inhibitory effect of atherogenic element on fibrinolytic system. The present study revealed that there was increase in PT and APTT while the levels of fibrinogen were reduced in

experimental groups using low and high concentration of canola (B and D) as compared to those on atherogenic element (C and E) in which there was decrease in PT and APTT while the levels of fibrinogen were increased.

Conclusion:

Thus it is concluded that canola oil has beneficial effect on coagulation parameters due to its high contents of monounsaturated fatty acids and omega-3 and may be recommended for human consumption in this country to reduce the incidence of ischemic heart disease.

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ANNALS VOL 10 NO.3 JUL - SEP 2004 243